Dacket No.: 067161-0130

### **PATENT**

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of

Customer Number: 20277

Yoshikazu NAGAMURA, et al.

Confirmation Number: 1874

Application No.: 10/714,362

Group Art Unit: 1756

Filed: November 17, 2003

Examiner: Stephen Rosasco

For: PHOTOMASK, AND METHOD AND APPARATUS FOR PRODUCING THE SAME

# **PETITION FOR EXTENSION OF TIME**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

It is respectfully requested that the time for response to the Office Action dated June 15, 2006, now due to expire September 15, 2006, be extended for one (1) month and set to expire on October 16, 2006 (October 15, 2006 being a Sunday).

Please charge the extension fee of \$120.00 to Deposit Account No. 500417. Please charge any additional fees or credit any overpayment to Deposit Account No. 500417.

Respectfully submitted,

McDERMOTT WILL & EMERY LLP

Bernard P. Codd

Registration No. 46,429

10/17/2006 MBERHE

Br. K. Sink Res. No. 51,521

Please recognize ou# Eustomer No. 20277 as our correspondence address.

**98876 588417** 

10714362

Facsimile: 202.756.8087 Date: October 16, 2006

Washington, DC 20005-3096

Phone: 202.756.8000 BPC:kap

600 13th Street, N.W.

Docket No.: 067161-0130

#### **PATENT**

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Yoshikazu NAGAMURA, et al.

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OCT 1 6 2008

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a Response to Office Action in the above-identified application.

No additional fee is required.

Applicant is entitled to small entity status under 37 CFR 1.27 Also attached: Petition for Extension of Time (1-month)

The fee has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	11	20	0	\$50.00 =	\$0.00
Independent Claims	2	3	0	\$200.00 =	\$0.00
	,	Multiple dependen	ple dependent claims newly presented		\$0.00
		Fee for extension of time			\$120.00
					\$0.00
			Total of Above Calculations		\$120.00

冈 Please charge my Deposit Account No. 500417 in the amount of \$120.00. An additional copy of this transmittal sheet is submitted herewith.

X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment, to Deposit Account No. 500417, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

McDERMOTT WILL & EMERY LLP

En K. Jul Res. No. 51,321 Bernard P. Codd

Registration No. 46,429

Please recognize our Customer No. 20277 as our correspondence address.

600 13th Street, N.W.

Washington, DC 20005-3096 Phone: 202.756.8000 BPC:kap

Facsimile: 202.756.8087 Date: October 16, 2006